

CITY OF BROOKLYN

7619 Memphis Avenue, Brooklyn, OH 44144 Phone 216-351-2133 Fax 216-351-5800

CHANGE OF OCCUPANCY

/5.00 FEE		PERMIT #	OC
PROPOSED STORE OR BU	SINESS ADDRESS:		
NAME OF STORE OR BU	SINESS:		
STORE/BUSINESS PHONE	:		
PROPOSED TYPE OF STO	RE OR BUSINESS:		
4A.) ZONING FOR THIS L	OCATION:		
4B.) DOES BUSINESS COM	NFORM? YES / NO		
EXPLANATION OF ALTER	ATION OR REMODELING	WORK PLANNED (INCLUDE ELECTRI	CAL,
PHONE NUMBER:	CELL #:	EMAIL:	
OWNER OF PROPERTY	NAME:		
ADDRESS OF PROPERTY	NAME:		
PHONE NUMBER:	CELL #:	EMAIL:	
CONTACT INFORMATION	N TO GAIN ACCESS TO PR	OPERTY FOR INSPECTION:	
NAME:	PHONE NUM	MBER:	
FORMER BUSINESS AT TI	HIS LOCATION:		
DATE	APPLICANT NAME:		
	SIGNA	ΓURE:	

MUST SUBMIT:

DRAWING OF A FLOOR PLAN OF THE PROPOSED STORE OR BUSINESS. ◆ DRAWING OF PLOT PLAN SHOWING NUMBER OF PARKING SPACES AVAILABLE. ◆ DESCRIPTION OF BUSINESS.